# Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 1 of 56

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this is an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identity Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin iden	e the name that is on r government-issued ure identification (for mple, your driver's nise or passport).  g your picture tification to your sting with the trustee.	Stacey First name  Lynn Middle name  Hayes Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-1664	

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 2 of 56

Case number (if known)

Debtor 1 Stacey Lynn Hayes

		About Debtor 1:	About Debtor	2 (Spouse Only in a Joint Case):	
	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)		
		EINs	EINs		
j.	Where you live	20019 Roosevelt Ave	If Debtor 2 liv	es at a different address:	
		Number, Street, City, State & ZIP Code	Number, Stree	et, City, State & ZIP Code	
		Chesterfield			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		nailing address is different from yours, fill it that the court will send any notices to this ss.	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O.	Box, Street, City, State & ZIP Code	
<b>5.</b>	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	have live district.	e last 180 days before filing this petition, I ed in this district longer than in any other nother reason. (See 28 U.S.C. § 1408.)	

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 3 of 56

Case number (if known) Debtor 1 Stacey Lynn Hayes

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapter 7							
		☐ Cha	apter 11						
		☐ Cha	apter 12						
		■ Cha	apter 13						
8.	How you will pay the fee	6	about how yo	entire fee when I file my pour may pay. Typically, if you a attorney is submitting your paddress.	re paying	the fee yourself,	you may pay with cash	n, cashier's check, or money	
			need to pay	the fee in installments. If y		e this option, sign	and attach the Applica	ation for Individuals to Pay	
			•	e in Installments (Official For	,	this and an early if		otan Z. Doubana a Sadan arang	
		_ k	out is not requapplies to you	t my fee be waived (You ma uired to, waive your fee, and or family size and you are una on to Have the Chapter 7 Filir	may do so able to pay	o only if your incor the fee in install	me is less than 150% oments). If you choose	of the official poverty line that this option, you must fill out	
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes							
			District	Eastern District of Virginia - Richmond Division	When	3/29/19	Case number	19-31712	
			District	Eastern District of Virginia - Richmond Division	When	3/29/18	Case number	18-31663	
			District	See Attachment	When		Case number		
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes							
			Debtor				Relationship to y	/ou	
			District		_ When		Case number, if	known	
			Debtor				Relationship to y	/ou	
			District		_ When		Case number, if	known	
11.	Do you rent your residence?	■ No.	Go to li	ne 12.					
		☐ Yes	. Has yo	ur landlord obtained an evict	ion judgm	ent against you?			
				No. Go to line 12.					
				Yes. Fill out Initial Statemen	t About ar	Eviction Judame	ent Against You (Form	101A) and file it as part of	

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 4 of 56

Debtor 1 Stacey Lynn Hayes Case number (if known)

art	3: Report About Any Bu	sinesses `	You Own	as a Sole Proprieto	r	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of busin	ess	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	er, Street, City, State	& ZIP Code	
	it to this petition.		Check	the appropriate box	to describe your business:	
				Health Care Busine	ss (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real E	state (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as def	ined in 11 U.S.C. § 101(53A))	
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you inc s, cash-flo	dicate that you are a low statement, and fed	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure	
	For a definition of small	■ No.	I am n	ot filing under Chapte	er 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fil Code.	ing under Chapter 1	1, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am fil	ing under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.	
art	4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and	Yes.	What is t	ne hazard?		
	identifiable hazard to public health or safety? Or do you own any property that needs			ate attention is		
	immediate attention?		needed,	why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?		
				I	Number, Street, City, State & Zip Code	

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 5 of 56

Debtor 1 Stacey Lynn Hayes

Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 6 of 56

Case number (if known) Debtor 1 Stacey Lynn Hayes Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000** □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million ☐ More than \$50 billion 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Stacey Lynn Hayes Signature of Debtor 2 Stacey Lynn Hayes Signature of Debtor 1 Executed on October 29, 2019 Executed on MM / DD / YYYY MM / DD / YYYY

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 7 of 56

Debtor 1 Stacey Lynn Hayes

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	E. Kane, Esquire Attorney for Debtor	Date	October 29, 2019 MM / DD / YYYY
James E. I	Kane, Esquire 30081		
Kane & Pa	pa, P.C.		
	, VA 23218-0508		
Contact phone	804-225-9500	Email address	jkane@kaneandpapa.com
30081 VA	tata		<u> </u>

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 8 of 56

Debtor 1 Stacey Lynn Hayes

Case number (if known)

Fill in this infor	mation to identify your	case:		
Debtor 1	Stacey Lynn Hay	es		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number				
(II KIIOWII)				Check if this is an amended filing

### FORM 101. VOLUNTARY PETITION

### **Prior Bankruptcy Cases Filed Attachment**

District	Case Number	Date Filed
Eastern District of Virginia - Richmond Division	19-31712	3/29/19
Eastern District of Virginia - Richmond Division	18-31663	3/29/18
Eastern District of Virginia - Richmond Division	15-34838	9/18/15

		Docum	ent Page 9 of 50	<u> </u>	
Fill in this inforr	mation to identify your	case:			
Debtor 1	Stacey Lynn Hay	es			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT C	DF VIRGINIA		
Case number (if known)					☐ Check if this is an amended filing
					· ·

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	24,084.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	24,084.00
Pa	rt 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	42,212.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	15,818.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	32,094.00
	Your total liabilities	\$	90,124.00
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,309.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,391.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

#### Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Case 19-35724-KLP Page 10 of 56 Case number (if known) Document

Debtor 1 Stacey Lynn Hayes

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,786.68 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Tota	ıl claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	15,818.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	15,677.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	31,495.00

	Cas	C 13-33/24-NLF D	Documen		130/13 14.32.31 1	Jesc Main
Fill in	this info	rmation to identify your case		T auc II of 30		
			g-			
Debto	or 1	Stacey Lynn Hayes First Name	Middle Name	Last Name		
Debto	or 2	. not realing	madic Hame	Zaot Hamo		
	e, if filing)	First Name	Middle Name	Last Name		
Unite	d States F	sankruptcy Court for the: EAS	TERN DISTRICT OF \	/IRGINIA		
Orinto	a Olaloo L	Entrapley Court for the.	TERRO DIOTRIOT OF V	- Intolitin		
Case	number					☐ Check if this is an
						amended filing
Offi	cial F	orm 106A/B				
			I			
SCI	nedu	le A/B: Propert	ty			12/15
		separately list and describe item				
		Be as complete and accurate as pore space is needed, attach a sepa				
Answe	r every que	estion.				
Part 1	Describ	e Each Residence, Building, Land	d, or Other Real Estate Y	ou Own or Have an Interest In		
		<del>-</del>				
1. <b>Do</b> y	you own o	have any legal or equitable inter	est in any residence, bu	ilding, land, or similar property?	?	
	No. Go to P	art 2.				
_		is the property?				
_		no and property :				
Part 2	Describ	e Your Vehicles				
Da va	10	ann ar hava laral ar arvitable	a interest in any vehic	alaa uubathar thay ara ragiat	nered er met? Include envive	hialaa waxaa ahaa
		ase, or have legal or equitable rives. If you lease a vehicle, als				enicies you own that
		,	·	Ž	•	
3. <b>Ca</b>	rs, vans, t	rucks, tractors, sport utility v	ehicles, motorcycles			
□ 1	No					
•	r'es					
_	163					
3.1	Make:	GMC	M/ha hao an intarao	t in the property? Check one	Do not deduct secured cla	aims or exemptions. Put
3.1		Yukon XL	_	t in the property? Check one	the amount of any secure	
	Model: Year:	2012	■ Debtor 1 only		Creditors Who Have Clair	
		ate mileage: 176,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 1	otor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other info			e debtors and another	chare property:	portion you own:
	0		At least one of the	s debiois and another		
			☐ Check if this is o	community property	\$10,989.00	\$10,989.00
			(see instructions)			
3.2	Make:	Suzuki	Who has an interes	t in the property? Check one	Do not deduct secured cla the amount of any secure	
	Model:	Intruder 1500	Debtor 1 only		Creditors Who Have Clair	
	Year:	2002	Debtor 2 only		Current value of the	Current value of the
	Approxim	ate mileage: 46,000	Debtor 1 and Deb	otor 2 only	entire property?	portion you own?
	Other info	rmation:	_	e debtors and another		
					¢2 070 00	¢2 070 00
			Check if this is ( (see instructions)	community property	\$2,070.00	\$2,070.00
	1		(see manuchons)			

Official Form 106A/B Schedule A/B: Property page 1

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 12 of 56 Case number (if known) Debtor 1 Stacey Lynn Hayes Do not deduct secured claims or exemptions. Put Kawasaki Who has an interest in the property? Check one 3.3 Make the amount of any secured claims on Schedule D: Ninja 650R Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2012 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 24,000 entire property? portion you own? Debtor 1 and Debtor 2 only Other information At least one of the debtors and another \$2,955.00 \$2,955.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories □ No Yes Make: Tracker Who has an interest in the property? Check one Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Targa 17.5 WT Debtor 1 only Creditors Who Have Claims Secured by Property. Model: 2010 Year: Debtor 2 only Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$7,000.00 \$7,000.00 ☐ Check if this is community property (see instructions) 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$23,014.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... Household Goods and Furnishings \$200.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... 1 TV \$100.00 8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

#### 9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

☐ Yes. Describe.....

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 13 of 56

		17.2.	Savings	VA Credit Union	\$20.00
		17.1.	Checking	VA Credit Union	\$20.00
ı				counts; certificates of deposit; shares in credit unions, brokerage is with the same institution, list each.  Institution name:	houses, and other similar
				Cash	\$400.00
ı	Cash Examples: Money you □ No ■ Yes		-	ome, in a safe deposit box, and on hand when you file your peti	tion
DO	you own or mave any i	egai oi e	quitable litterest li	nany of the following:	portion you own? Do not deduct secured claims or exemptions.
	t 4: Describe Your Finan			n any of the following?	Current value of the
15.				Part 3, including any entries for pages you have attached	\$630.00
-	Any other personal an  ■ No  □ Yes. Give specific inf			I not already list, including any health aids you did not list	
	Examples: Dogs, cats,  ☐ No  ☐ Yes. Describe	1 Dog			\$30.00
	Non-farm animals	hirds ha	roos		
ļ	Jewelry  Examples: Everyday je  No  Yes. Describe	welry, co	stume jewelry, enga	agement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
		Clothi	ng		\$200.00
ļ	Clothes  Examples: Everyday cl  No  Yes. Describe	othes, fur	s, leather coats, de	signer wear, shoes, accessories	
		2 hand	dguns		\$100.00
	□ No ■ Yes. Describe				
	Firearms  Examples: Pistols, rifle	s, shotgu	ns, ammunition, and	d related equipment	
	Stacey Lynr	i i layes		Case number (if known)	·

Official Form 106A/B

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 14 of 56 Case number (if known) Debtor 1 Stacey Lynn Hayes 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **Defined Benefit Plan** Honeywell (not accessible until age 59 1/2 Unknown **Debtor is currently 54)** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 15 of 56

D	ו וטוטב	Stacey Lynn Hayes	Case Hulliber (II known)	
28.	Tax refu ■ No	ands owed to you		
		Sive specific information about them, including whether you alrea	dy filed the returns and the tax years	
	■ No	support es: Past due or lump sum alimony, spousal support, child suppo	rt, maintenance, divorce settlement, property s	ettlement
30.		mounts someone owes you es: Unpaid wages, disability insurance payments, disability bene benefits; unpaid loans you made to someone else	fits, sick pay, vacation pay, workers' compens	sation, Social Security
	☐ Yes. (	Give specific information		
31.		s in insurance policies les: Health, disability, or life insurance; health savings account (H	dSA); credit, homeowner's, or renter's insuranc	e
	☐ Yes. N	lame the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
32.	If you as someon	erest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life ins he has died.  Give specific information		ve property because
33.	Exampl ■ No	against third parties, whether or not you have filed a lawsuit es: Accidents, employment disputes, insurance claims, or rights  Describe each claim		
34.	■ No	ontingent and unliquidated claims of every nature, including	counterclaims of the debtor and rights to	set off claims
	☐ Yes. I	Describe each claim		
35.	■ No	ancial assets you did not already list  Give specific information		
36		ne dollar value of all of your entries from Part 4, including an rt 4. Write that number here		\$440.00
Pa	rt 5: Des	cribe Any Business-Related Property You Own or Have an Interest Ir	n. List any real estate in Part 1.	
-	Do you ov No. Go		operty?	
Pa		cribe Any Farm- and Commercial Fishing-Related Property You Own u own or have an interest in farmland, list it in Part 1.	or Have an Interest In.	
46.	No. G	own or have any legal or equitable interest in any farm- or co So to Part 7. Go to line 47.	ommercial fishing-related property?	
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did	Not List Above	

Schedule A/B: Property

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 16 of 56

Part 8: List the Totals of Each Part of this Form  55. Part 1: Total real estate, line 2	Deb	tor 1 Stacey Lynn Hayes		Case number (if kno	wn)
Part 8: List the Totals of Each Part of this Form  55. Part 1: Total real estate, line 2	•	Examples: Season tickets, country club membership  No	y list?		
Part 8: List the Totals of Each Part of this Form  55. Part 1: Total real estate, line 2		·			
55. Part 1: Total real estate, line 2	54.	Add the dollar value of all of your entries from Part 7. Wri	ite tha	t number here	\$0.00
56. Part 2: Total vehicles, line 5  57. Part 3: Total personal and household items, line 15  58. Part 4: Total financial assets, line 36  59. Part 5: Total business-related property, line 45  60. Part 6: Total farm- and fishing-related property, line 52  \$0.00					
57. Part 3: Total personal and household items, line 15 \$630.00  58. Part 4: Total financial assets, line 36 \$440.00  59. Part 5: Total business-related property, line 45 \$0.00  60. Part 6: Total farm- and fishing-related property, line 52 \$0.00		,			\$0.00
58. Part 4: Total financial assets, line 36 \$440.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00	56.	Part 2: Total vehicles, line 5		\$23,014.00	
59. Part 5: Total business-related property, line 45 \$0.00  60. Part 6: Total farm- and fishing-related property, line 52 \$0.00	57.	Part 3: Total personal and household items, line 15		\$630.00	
60. Part 6: Total farm- and fishing-related property, line 52 \$0.00	58.	Part 4: Total financial assets, line 36		\$440.00	
	59.	Part 5: Total business-related property, line 45		\$0.00	
61. Part 7: Total other property not listed, line 54 + \$0.00	60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00	
ψυ.υυ — ψυ.υυ	61.	Part 7: Total other property not listed, line 54	+	\$0.00	

\$24,084.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$24,084.00

\$24,084.00

		Dodanic	THE TAUC IT OF OU	
Fill in this inform	mation to identify your	case:		
Debtor 1	Stacey Lynn Hay	es		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number _				
(				

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim	n as	Exempt
---	------	--------

	١.	Which set of exemptions are	vou claiming?	Check one only.	even if your spou	use is filing with vo
--	----	-----------------------------	---------------	-----------------	-------------------	-----------------------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Household Goods and Furnishings Line from Schedule A/B: 6.1	\$200.00		\$200.00	Va. Code Ann. § 34-26(4a)
Ellie Holli Genedale PAB. 411		☐ 100% of fair market value, up to any applicable statutory limit		
1 TV Line from Schedule A/B: 7.1	\$100.00		\$100.00	Va. Code Ann. § 34-26(4a)
Line IIIII Schedule PAB. 1.1			100% of fair market value, up to any applicable statutory limit	
2 handguns Line from Schedule A/B: 10.1	\$100.00		\$100.00	Va. Code Ann. § 34-26(4b)
Ellie II olii osii oddio 702. 1011			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	Va. Code Ann. § 34-26(4)
Ellie IIolii osiloddio 702.			100% of fair market value, up to any applicable statutory limit	
1 Dog Line from Schedule A/B: 13.1	\$30.00		\$30.00	Va. Code Ann. § 34-26(5)
LINE HOLL SCHEUUIE PVD. 13.1			100% of fair market value, up to any applicable statutory limit	

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 18 of 56

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 18 of 56

Case number (if known)

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che		
	Cash Line from <i>Schedule A/B</i> : <b>16.1</b>	\$400.00	•	\$400.00	Va. Code Ann. § 34-4
,	Line Holli Schedule A/B. 19.1			100% of fair market value, up to any applicable statutory limit	
	Checking: VA Credit Union Line from Schedule A/B: 17.1	\$20.00		\$20.00	Va. Code Ann. § 34-4
	Line Ironi S <i>criedule A/b.</i> 11.1			100% of fair market value, up to any applicable statutory limit	
	Savings: VA Credit Union Line from Schedule A/B: 17.2	\$20.00		\$20.00	Va. Code Ann. § 34-4
	Line Holli Scriedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit	
	Defined Benefit Plan: Honeywell (not	Unknown			Va. Code Ann. § 34-34
(	accessible until age 59 1/2 Debtor is currently 54) Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)
	■ No				
l	Yes. Did you acquire the property covered	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

	Document F	Page 19 ∂	of 56		
Fill in this information to identify yo	ur case:				
Debtor 1 Stacey Lynn Ha	aves				
First Name	<u> </u>	ast Name		-	
Debtor 2					
(Spouse if, filing) First Name	Middle Name L	ast Name			
United States Bankruptcy Court for the	EASTERN DISTRICT OF VIRGIN	IIA			
				-	
Case number (if known)				☐ Check	if this is an
(i. i.i.dii.i)				_	led filing
				umone	ica ming
Official Form 106D					
Schedule D: Creditors	s Who Have Claims So	ecured	hy Propert	V	12/15
Seriedate B. Oreattors	3 Willo Have Glaims 3	<del>ccui cu</del>	by 1 Topert	<u> </u>	12/10
Be as complete and accurate as possible.					
is needed, copy the Additional Page, fill it number (if known).	out, number the entries, and attach it to	inis form. On t	ne top of any additio	nai pages, write your na	me and case
1. Do any creditors have claims secured b	y your property?				
☐ No. Check this box and submit	this form to the court with your other sc	hedules. You	have nothing else t	to report on this form.	
Yes. Fill in all of the information	•		<b>3</b>		
	below.				
Part 1: List All Secured Claims			Column A	Column B	Column C
2. List all secured claims. If a creditor has for each claim. If more than one creditor ha			Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabet		Fail 2. AS	Do not deduct the	that supports this	portion
0.4 A0A0 In-	Barrier de la companya del companya de la companya del companya de la companya de		value of collateral.	claim	If any
2.1 ACAC, Inc  Creditor's Name	Describe the property that secures the		\$820.00	\$2,070.00	\$0.00
Creditor 3 Name	2002 Suzuki Intruder 1500 46,0 miles	000			
	lilles				
2019 S. Crater Road	As of the date you file, the claim is: Che apply.	eck all that			
Petersburg, VA 23805	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as mo	rtgage or secure	ed		
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	ınic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	urchase Mo	ney Security		
community debt					
Date debt was incurred 2018	Last 4 digits of account number	1664			
2.2 Hopewell Chemical FCU	Describe the property that secures the	claim:	\$7,005.00	\$7,000.00	\$5.00
Creditor's Name	2010 Tracker Targa 17.5 WT				
DO D 140	As of the date you file, the claim is: Che	eck all that			
PO Box 449 Hopewell, VA 23860	apply.				
	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as more	rtgage or secur	ed		
Debtor 2 only	car loan)	ingage of cooun	<b></b>		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	ınic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a		urchase Mo	ney Security		
community debt			•		
Date debt was incurred 2013	Last 4 digits of account number	1664			
2010					

# Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 20 of 56

Debtor 1 Stacey Lynn Hayes		Case number (if known)		
First Name Middle N	lame Last Name	_		
2.3 Peritus Portfolio	Describe the property that secures the clair	m: \$3,770.00	\$2,955.00	\$815.00
Creditor's Name	2012 Kawasaki Ninja 650R 24,000 miles	75,75300	Ψ=,000.00	
PO BOX 141419 Irving, TX 75014	As of the date you file, the claim is: Check all apply.  Contingent	that		
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgag car loan)	e or secured		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's ☐ Judgment lien from a lawsuit	lien)		
Check if this claim relates to a community debt	<del>-</del>	hase Money Security		
Date debt was incurred 2013	Last 4 digits of account number	1664		
Regional Acceptance		\$20.C47.00	£40,000,00	\$40,000,00
Creditor's Name	Describe the property that secures the claim		\$10,989.00	\$19,628.00
Creditor's Name	2012 GMC Yukon XL 176,000 mile	S		
266 Beacon Drive Winterville, NC 28590	As of the date you file, the claim is: Check all apply.  Contingent	that		
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgag car loan)	e or secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
$\square$ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	hase Money Security		
Date debt was incurred 2014	Last 4 digits of account number	1664		
			_	
Add the dollar value of your entries in C If this is the last page of your form, add Write that number here:	Column A on this page. Write that number here the dollar value totals from all pages.	e: \$42,212.00 \$42,212.00	_	
Part 2: List Others to Be Notified for	or a Debt That You Already Listed			
Use this page only if you have others to be trying to collect from you for a debt you of	oe notified about your bankruptcy for a debt tl owe to someone else, list the creditor in Part 1 t you listed in Part 1, list the additional credit	I, and then list the collection agency	/ here. Similarly, if y	ou have more
Name, Number, Street, City, State &	Zip Code	On which line in Part 1 did you enter th	ne creditor? 2.3	
Lendmark Financial 2118 Usher Street Covington, GA 30014		Last 4 digits of account number		

	Ousc	10 0012+ REI	D00 1	Document	Page	21 of 5	56	J2:01 D000	IVICIII
Fill	l in this inform	ation to identify your	case:						
Del	btor 1	Stacey Lynn Haye	es						
		First Name		e Name	Last Name	)			
	btor 2	T. A.V.							
(Spo	ouse if, filing)	First Name	Middle	e Name	Last Name	9			
Uni	ited States Ban	kruptcy Court for the:	EASTER	N DISTRICT OF VIRO	SINIA				
Ca	se number								
_	nown)							☐ Check	if this is an
								amend	ed filing
∩f	ficial Form	106E/E							
		/F: Creditors W	ho Hav	a Unsacurad	Claim	2			12/15
		accurate as possible. Us					r craditors with NON	PRIORITY claims. Lie	
Scho eft.	edule D: Credito	ory Contracts and Unexpirs Who Have Claims Sections Page to this pag ber (if known).	ured by Prop	perty. If more space is	needed, co	py the Part	you need, fill it out, i	number the entries ir	the boxes on the
Pai	rt 1: List All	of Your PRIORITY Un	secured C	laims					
1.	Do any creditor	s have priority unsecured	d claims aga	inst you?					
	☐ No. Go to Pa	ırt 2.							
	Yes.								
2.	identify what type possible, list the	priority unsecured claims e of claim it is. If a claim ha claims in alphabetical orde nan one creditor holds a pa	s both prioriter according t	y and nonpriority amoun o the creditor's name. If	ts, list that o	laim here ar	nd show both priority a	nd nonpriority amount	s. As much as
	(For an explanat	tion of each type of claim, s	ee the instru	ctions for this form in the	instruction	booklet.)			
							Total claim	Priority amount	Nonpriority amount
2.1	Chesterf	ield County Treasu	rer	Last 4 digits of accou	nt number	1664	\$12,323.00	\$3,698.00	\$8,625.00
	Priority Cre	ditor's Name		When was the debt in	a	2010			
		nd, VA 23261		when was the debt in	currear	2019		-	
		eet City State Zip Code		As of the date you file	, the claim	is: Check al	II that apply		
	Who incurred	the debt? Check one.		☐ Contingent					
	Debtor 1 or	nly		☐ Unliquidated					
	Debtor 2 or	nly		☐ Disputed					
	Debtor 1 ar	nd Debtor 2 only		Type of PRIORITY uns	secured cla	im:			
	☐ At least one	e of the debtors and anothe	r	☐ Domestic support of	bligations				
	☐ Check if th	is claim is for a commun	ity debt	■ Taxes and certain o	ther debts y	ou owe the	government		
	Is the claim su	ubject to offset?		☐ Claims for death or	personal inj	ury while you	u were intoxicated		
	■ No			Other. Specify					
	☐ Yes			Та	ixes				

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 22 of 56

Deb	otor 1 Stacey Lynn Hayes		Case nui	mber (if known)				
2.2	Internal Revenue Service	Last 4 digits of account number	1664	\$3,380.00	\$3,380.00	\$0.00		
	Priority Creditor's Name Centralized Insolvency Operati P. O. Box 7346	When was the debt incurred?	2019					
	Philadelphia, PA 19101-7346  Number Street City State Zip Code	As of the date you file, the claim	is: Check all	that apply				
	Who incurred the debt? Check one.	☐ Contingent	ioi onook an	тас арргу				
	■ Debtor 1 only	☐ Unliquidated						
	☐ Debtor 2 only	☐ Disputed						
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:					
	☐ At least one of the debtors and another	☐ Domestic support obligations						
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the a	overnment				
	Is the claim subject to offset?	☐ Claims for death or personal inj	J					
	No	☐ Other. Specify						
	☐ Yes	Taxes						
2.3	Virginia Department of Taxatio	Last 4 digits of account number	1664	\$115.00	\$115.00	\$0.00		
	Priority Creditor's Name PO Box 2369 Richmond, VA 23218	When was the debt incurred?	2016					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all	that apply				
	Who incurred the debt? Check one.	☐ Contingent						
	■ Debtor 1 only	☐ Unliquidated						
	☐ Debtor 2 only	☐ Disputed						
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:					
	☐ At least one of the debtors and another	☐ Domestic support obligations						
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the go	overnment				
	Is the claim subject to offset?	☐ Claims for death or personal inj	ury while you	were intoxicated				
	■ No	☐ Other. Specify						
	☐ Yes	Taxes						
Par	t 2: List All of Your NONPRIORITY Unsecu	red Claims						
3.	Do any creditors have nonpriority unsecured claims	s against you?						
	☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.							
	■ Yes.							
	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other	aim. For each claim listed, identify wh	at type of clai	im it is. Do not list claims	already included in Part	t 1. If more		

Il out the Continuation Page of

Total claim

Part 2.

Stacey Lynn Hayes		
Boleman Law Firm Nonpriority Creditor's Name	Last 4 digits of account number 1664	\$4,349
2104 W Laburnum Ave Suite 201 Richmond, VA 23227	When was the debt incurred? 2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Possible legal Fees	
Brookwood Loans of Virginia	Last 4 digits of account number	\$3,447
Nonpriority Creditor's Name  2901 South Lynnhaven Rd.  Suite 140	When was the debt incurred? 2019	
Virginia Beach, VA 23452 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Consumer Debt	
Cash 2 U Financial Service	Last 4 digits of account number 1664	\$629
Nonpriority Creditor's Name 4721 West Broad St. Richmond, VA 23230	When was the debt incurred? 2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	

■ No

☐ Yes

Other. Specify Consumer Debt

☐ Student loans

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

 $\hfill\square$  Check if this claim is for a community

Is the claim subject to offset?

Debto	r 1 Stacey Lynn Hayes	Document Page 2	4 of 56 Case number (if known)	
4.4	Commonwealth Dentistry	Last 4 digits of account number	1664	\$115.00
	Nonpriority Creditor's Name 6750 Forest Hill Ave Richmond, VA 23225	When was the debt incurred?	2019	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Medical		
4.5	Credit One Bank	Last 4 digits of account number	1664	\$1,727.00
	Nonpriority Creditor's Name P.O. Box 98873	When was the debt incurred?	2019	
	Las Vegas, NV 89193 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	7.0 0 44.0 , 04 , 0.4	on on an anatappi,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Consumer		
4.6	Henrico Federal Credit Union	Last 4 digits of account number	1664	\$720.00
	Nonpriority Creditor's Name 9401 West Broad Street Henrico, VA 23294	When was the debt incurred?	2019	
	Number Street City State Zip Code			
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	Student loans		
	debt	☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims	<u> </u>	

■ No

☐ Yes

■ Other. Specify Consumer Debt

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Debto	Case 19-35724-KLP Doc 1  Stacey Lynn Hayes	Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Document Page 25 of 56 Case number (if known)	Main
4.7	Jefferson Capital Systems	Last 4 digits of account number 8776	\$556.00
	Nonpriority Creditor's Name P O Box 772813 Chicago II 60677	When was the debt incurred? 2019	
	Chicago, IL 60677  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Consumer Debt	
4.8	Jefferson Capital Systems	Last 4 digits of account number 9444	\$898.00
	Nonpriority Creditor's Name P O Box 772813 Chicago, IL 60677	When was the debt incurred? 2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Consumer Debt	
4.9	Lab Corp	Last 4 digits of account number 1664	\$32.00
	Nonpriority Creditor's Name	<del></del>	•
	DO Doy 40507	When was the debt incurred? 2019	
	PO Box 10587 Greenville, SC 29603		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	

■ No

☐ Yes

■ Other. Specify Medical

☐ Student loans

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

 $\hfill\square$  Check if this claim is for a community

Is the claim subject to offset?

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 26 of 56

Stacev Lynn Haves

Stacey Lynn Hayes		Case number (if known)	
Noth Shore Medical Labs	Last 4 digits of account number	1664	\$826.
Nonpriority Creditor's Name 463 Willis Avenue	When was the debt incurred?	2019	
Williston Park, NY 11596  Number Street City State Zip Code	As of the date you file, the claim	ic: Chook all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	is. Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other Specify Medical		
Peoples Advantage FCU	Last 4 digits of account number	1664	\$467.
Nonpriority Creditor's Name		2040	
PO Box 3180 Petersburg, VA 23805	When was the debt incurred?	2019	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and the same starting delices	
■ No	Debts to pension or profit-sharin		
Yes	Other. Specify Consumer	Debt	
Progressive	Last 4 digits of account number	1664	\$354
Nonpriority Creditor's Name 11629 South 700 East Suite 250	When was the debt incurred?	2019	
Draper, UT 84020	_		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
∏ yes	Other Chesity Consumer	Debt	

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Debtor 1 Stacev Lynn Haves

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main December 1 Stacev Lynn Haves

\$716.00	1664	Last 4 digits of account number	Shiva Finance LLC
	2019	When was the debt incurred?	Nonpriority Creditor's Name PO BOx 121950 Nashville, TN 37212
	s: Check all that apply	As of the date you file, the claim is	Number Street City State Zip Code
			Who incurred the debt? Check one.
		☐ Contingent	Debtor 1 only
		☐ Unliquidated	☐ Debtor 2 only
		☐ Disputed	☐ Debtor 1 and Debtor 2 only
	l claim:	Type of NONPRIORITY unsecured	☐ At least one of the debtors and another
		☐ Student loans	☐ Check if this claim is for a community
ou did not	ration agreement or divorce that you did not	Obligations arising out of a separ report as priority claims	debt Is the claim subject to offset?
	g plans, and other similar debts	Debts to pension or profit-sharing	■ No
	Debt	Other. Specify Consumer [	Yes
\$1,581.00	1664	Last 4 digits of account number	Thomas Schleicher, DDS
	2019	When was the debt incurred?	Nonpriority Creditor's Name 3630 Boulevard
	2013	mon was the dest meaned.	Colonial Heights, VA 23834
	s: Check all that apply	As of the date you file, the claim is	Number Street City State Zip Code
			Who incurred the debt? Check one.
		☐ Contingent	Debtor 1 only
		☐ Unliquidated	☐ Debtor 2 only
		☐ Disputed	☐ Debtor 1 and Debtor 2 only
	l claim:	Type of NONPRIORITY unsecured	$\square$ At least one of the debtors and another
		☐ Student loans	☐ Check if this claim is for a community
ou did not	ration agreement or divorce that you did not	Obligations arising out of a separ report as priority claims	debt Is the claim subject to offset?
	g plans, and other similar debts	☐ Debts to pension or profit-sharing	■ No
		Other. Specify Medical	Yes
\$15,677.00	1664		
\$15,677.00		Other. Specify Medical  Last 4 digits of account number	US Dept of Education  Nonpriority Creditor's Name
\$15,677.00	1664 2019		US Dept of Education Nonpriority Creditor's Name PO Box 530229
\$15,677.00	2019	Last 4 digits of account number  When was the debt incurred?	US Dept of Education  Nonpriority Creditor's Name PO Box 530229  Atlanta, GA 30353
\$15,677.00	2019	Last 4 digits of account number	US Dept of Education Nonpriority Creditor's Name PO Box 530229
 \$15,677.00	2019	Last 4 digits of account number  When was the debt incurred?	US Dept of Education  Nonpriority Creditor's Name PO Box 530229 Atlanta, GA 30353  Number Street City State Zip Code Who incurred the debt? Check one.
\$15,677.00	2019	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is	US Dept of Education  Nonpriority Creditor's Name PO Box 530229 Atlanta, GA 30353  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only
\$15,677.00	2019	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is  Contingent	US Dept of Education  Nonpriority Creditor's Name PO Box 530229  Atlanta, GA 30353  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only
\$15,677.00	2019 s: Check all that apply	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is  Contingent Unliquidated	US Dept of Education  Nonpriority Creditor's Name PO Box 530229 Atlanta, GA 30353  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only
\$15,677.00	2019 s: Check all that apply	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is  Contingent Unliquidated Disputed	US Dept of Education  Nonpriority Creditor's Name PO Box 530229  Atlanta, GA 30353  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another
	2019 s: Check all that apply	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans	US Dept of Education  Nonpriority Creditor's Name PO Box 530229 Atlanta, GA 30353  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only
	2019 s: Check all that apply	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans	US Dept of Education  Nonpriority Creditor's Name PO Box 530229 Atlanta, GA 30353  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community
	2019 s: Check all that apply I claim: ration agreement or divorce that you did not	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separ	US Dept of Education  Nonpriority Creditor's Name PO Box 530229 Atlanta, GA 30353  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 28 of 56

Debtor 1 Stacey Lynn Hayes		Case number (if known)				
Ashley Funding Services	Line <u>4.9</u> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims				
P. O. Box 10587		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Greenville, SC 29603	Last 4 digits of account number	1664				
Name and Address	On which entry in Part 1 or Part 2 d					
Lafayette Ayers & Whitlock	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
10160 Staples Mill Road Suite 105		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Glen Allen, VA 23060	Last 4 digits of account number	1664				
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?				
LVNV Funding, LLC	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
P.O. Box 3038		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Evansville, IN 47730	Last 4 digits of account number	1664				
Name and Address		On which entry in Part 1 or Part 2 did you list the original creditor?				
Penn Credit	Line 2.3 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims				
PO Box 988 Harrisburg, PA 17108		☐ Part 2: Creditors with Nonpriority Unsecured Claims				
Thairisburg, FA T7 100	Last 4 digits of account number	1664				
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?				
Professional Credit Solutions	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
ATTN BANKRUPTCY PO Box 2625		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Chesterfield, VA 23832	Last 4 digits of account number	1664				
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?				
Professional Credit Solutions	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
ATTN BANKRUPTCY PO Box 2625		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Chesterfield, VA 23832						
,	Last 4 digits of account number	1664				

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 15,818.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 15,818.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 15,677.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 16,417.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 32,094.00

Fill in this infor	rmation to identify your	case:		
Debtor 1	Stacey Lynn Hay	es		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code					State what the contract or lease is for
2.1					
	Name				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
					_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			<u>—</u>
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	Nullibei	Street			
	City		State	ZIP Code	_
2.5					
	Name				<u>—</u>
	Number	Street			<u> </u>
	City		State	ZIP Code	_
	•				

		Docume	nt Page 30 o	f 56	
Fill in this	information to identify your	case:			
Debtor 1	Stacey Lynn Hay	/es			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
	ites Bankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Casa num	hor				
Case num					Check if this is an amended filing
Officia	l Form 106H				
		labtana			
Sched	lule H: Your Cod	leptors			12/15
ill it out, a our name		e boxes on the left. Attach ). Answer every question.	the Additional Page to	ion. If more space is needed, on this page. On the top of any and as a codebtor.	
■ No					
■ No	3				
	hin the last 8 years, have yo aa, California, Idaho, Louisiana			y? (Community property states angton, and Wisconsin.)	and territories include
	Go to line 3. s. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guarant	or or cosigner. Make s	if your spouse is filing with youre you have listed the credit 6G). Use Schedule D, Schedul	or on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to Check all schedules that ap	-
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2	Nome			_ Schedule D, line	
	Name			☐ Schedule E/F, line ☐ Schedule G, line	
=	Number Street			_	

State

City

ZIP Code

# Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 31 of 56

					_				
	in this information to identify your cotor 1 Stacey Lynr								
	otor 2	•							
	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF VIRGINIA						
(If kr	fficial Form 106l		-				ed filing ent showing p as of the follo	postpetition ch pwing date:	hapter
	chedule I: Your Inc	ome			ľ	VIIVI / DD/ T	111		12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing w	ng jointly, and your spith you, do not include	oouse is li e informat	ving with ion abou	you, inclute your spo	ude informa ouse. If more	tion about you space is ne	our eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse			
	If you have more than one job,	Employment status	■ Employed			☐ Emplo	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	Driver						
	Include part-time, seasonal, or self-employed work.	Employer's name	Fresenius USA M	lfg Inc					
	Occupation may include student or homemaker, if it applies.	Employer's address	920 Winter Street Waltham, MA 024						
		How long employed t	here? 3 Months	5		_			
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for any	line, writ	e \$0 in the	space. Inclu	de your non-f	filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all emp	loyers for	that perso	on on the line	s below. If yo	u need
					For De	btor 1	For Debto		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	55	5,248.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3. +9	S	0.00	+\$	N/A	

Official Form 106I Schedule I: Your Income page 1

5,248.00

N/A

Calculate gross Income. Add line 2 + line 3.

# Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 32 of 56

Debt	or 1	Stacey Lynn Hayes	_	Case	number ( <i>if known</i> )			
				For	Debtor 1	For Debtor 2 or		
	_						ling spouse	
	Сор	y line 4 here	4.	\$	5,248.00	\$	N/A	-
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,468.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	_
	5e.	Insurance	5e.	\$	571.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	-
	5g.	Union dues	5g.	\$_	0.00		N/A	_
_	5h.	Other deductions. Specify:	_ <sup>5h.+</sup>			+ \$	N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,039.00	\$	N/A	-
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,209.00	\$	N/A	-
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive						-
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A	-
	8e.	Social Security	8e.	\$_	0.00	\$	N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	-
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	-
	8h.	Other monthly income. Specify: Amortized Tax Refunds	8h.+	\$	100.00	+ \$	N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	100.00	\$	N/A	<b>A</b>
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	;	3,309.00 + \$		<b>N/A</b> = \$	3,309.00
11.	<ol> <li>State all other regular contributions to the expenses that you list in Schedule J.         Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.         Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.         Specify:</li></ol>							
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$	3,309.00
							Combir monthl	ned y income
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?					
		Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

# Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 33 of 56

=#III	in this informa	ition to identify yo	our caca:			1					
Deb	Stacey Lynn Hayes					Check if this is:  An amended filing					
Deb	tor 2						As	supplement show	ving postpetition cha	pter	
(Spo	ouse, if filing)						13	expenses as of	the following date:		
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA							MM / DD / YYYY				
	e number nown)										
Oi	fficial Fo	rm 106J									
So	chedule	J: Your	Exper	ises						12/15	
Be info	as complete a	and accurate as	possible eded, atta	If two married people are							
Par 1.		ribe Your House	hold								
١.	Is this a joint case?  ■ No. Go to line 2.										
		o line ∠. es Debtor 2 live i	in a senar	ate household?							
	_ 100: <b>200</b>		a copa.								
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of D	ebtor	2.			
2.	Do you have	a danandants?	■ No								
۷.	Do you have dependents? ■ No  Do not list Debtor 1 and □ ∨ Pe Fill out this information for Dependent's related to the period of the period o							Danandantia	Dago damandant		
	Debtor 2.	ebior rand	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?		
	Do not state	the							□ No		
	dependents								□Yes		
									□ No		
									☐ Yes		
									□ No		
									☐ Yes		
									□ No		
3.	Do your eyr	oenses include	_						☐ Yes		
J.	expenses o	f people other t d your depende	han $_{m \Box}$	No Yes							
		ate Your Ongoi									
exp				uptcy filing date unless y y is filed. If this is a supp							
the	value of sucl	h assistance an		government assistance it luded it on <i>Schedule I:</i> Y	•			Your expe	ansas		
(On	ficial Form 10	וטו.)						Tour expe			
4.	The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.				e 4.	\$_		700.00			
	If not includ	led in line 4:									
	4a. Real e	estate taxes				4a.	\$		0.00		
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.	. –		0.00		
				ipkeep expenses		4c.			150.00		
_		owner's associat				4d.	_		0.00		
5.	Additional r	nortgage payme	ents for yo	<b>our residence</b> , such as ho	me equity loans	5.	\$		0.00		

# Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 34 of 56

Debtor	Stacey Lynn Hayes	Case num	ber (if known)	
6. <b>Ut</b>	ilities:			
o. <b>o</b> . 6a		6a.	\$	0.00
6b		6b.	·	0.00
60		6c.		100.00
6d		6d.	· -	150.00
	od and housekeeping supplies	7.	\$	
	ildcare and children's education costs	7. 8.	\$	350.00
_		o. 9.	·	0.00
	othing, laundry, and dry cleaning		\$	100.00
	rsonal care products and services	10.	\$	75.00
	dical and dental expenses	11.	\$	55.00
	ansportation. Include gas, maintenance, bus or train fare.	12.	2	150.00
	not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books	13.	·	150.00
		14.		
	aritable contributions and religious donations	14.	Ф	0.00
	surance. Inot include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a.	2	0.00
	b. Health insurance	15b.		0.00
	c. Vehicle insurance	15c.		266.00
			*	
	d. Other insurance. Specify:	15d.	Φ	0.00
Sp	xes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify: Personal Property Taxes	16.	\$	45.00
	stallment or lease payments:	47-		
	a. Car payments for Vehicle 1	17a.	·	0.00
	b. Car payments for Vehicle 2	17b.	· -	0.00
	c. Other. Specify:	17c.		0.00
	d. Other. Specify:	17d.	\$	0.00
de	ur payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9. <b>Ot</b>	her payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		
	her real property expenses not included in lines 4 or 5 of this form or on Sche			
	a. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20b.	·	0.00
	c. Property, homeowner's, or renter's insurance	20c.	·	0.00
20	d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20	e. Homeowner's association or condominium dues	20e.	\$	0.00
i. <b>O</b> t	her: Specify: Pet food and supplies	21.	+\$	100.00
	Iculate your monthly expenses			
	a. Add lines 4 through 21.		\$	2,391.00
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,391.00
3. <b>C</b> a	Iculate your monthly net income.		L	
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,309.00
	b. Copy your monthly expenses from line 22c above.	23b.		2,391.00
		_00.	<u> </u>	2,001.00
23	c. Subtract your monthly expenses from your monthly income.	00*	·	918.00
	The result is your monthly net income.	23c.	\$	910.00
Fo	you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your diffication to the terms of your mortgage?			se or decrease because (
	No.			
	Vec Explain here:			

# Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 35 of 56

Fill in this info	rmation to identify your	2250			
Debtor 1	Stacey Lynn Haye				
Debtor 2	riotrano	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT	OF VIRGINIA		
Case number					
(if known)					☐ Check if this is an amended filing
Official For <b>Declara</b>		n Individua	l Debtor's So	chedules	12/15
years, or both. 1	18 U.S.C. §§ 152, 1341, 1 n Below		• •	• , , ,	or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an atto	orney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sun	nmary and schedules file	ed with this declaration	and
X /s/ Sta	acey Lynn Hayes		X		
	y Lynn Hayes		Signature of	f Debtor 2	
	ure of Debtor 1		<b>0</b>		
Date	October 29, 2019		Date		

# Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 36 of 56

Fil	l in this inforn	nation to identify you	r case:									
De	btor 1	Stacey Lynn Hay	•	LastNama								
	btor 2 ouse if, filing)	First Name	Middle Name  Middle Name	Last Name  Last Name								
	-	nkruptcy Court for the:	EASTERN DISTRICT OF									
0-												
	se number nown)					theck if this is an mended filing						
∩ı	fficial Fo	rm 107										
			Affairs for Individ	duals Filing for B	ankruptcy	4/19						
info	rmation. If m		attach a separate sheet to		equally responsible for sup or additional pages, write you							
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before								
1.	What is your	What is your current marital status?										
	<ul><li>☐ Married</li><li>■ Not mar</li></ul>	ried										
2.	During the last 3 years, have you lived anywhere other than where you live now?											
	■ No	■ No										
	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.											
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there						
<b>3.</b> stat					ity property state or territory co, Texas, Washington and W							
	■ No											
	☐ Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors (Of	fficial Form 106H).								
Pa	rt 2 Explai	n the Sources of You	r Income									
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?						
	□ No											
	Yes. Fill	in the details.										
			Debtor 1		Debtor 2							
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)						
From January 1 of current year until the date you filed for bankruptcy:		•	■ Wages, commissions, bonuses, tips	\$31,384.00	☐ Wages, commissions, bonuses, tips							
			☐ Operating a business		☐ Operating a business							

Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Case 19-35724-KLP Document

Page 37 of 56 Case number (if known) Debtor 1 Stacey Lynn Hayes

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	Gross income (before deducti exclusions)		Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last calen nuary 1 to	dar year: December 3	31, 2018 )	■ Wages, commissions, bonuses, tips	\$39	,880.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
		dar year bef December 3		■ Wages, commissions, bonuses, tips	\$11	,930.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
	and other winnings.  List each s	public benef If you are fili	it payments; ng a joint cas ne gross inco	per that income is taxable. Exappensions; rental income; inter it and you have income that you from each source separate.	est; dividends; mo ou received toget	oney collec her, list it o	ted from lawsuits; nly once under De	royalties; and ebtor 1.	
	<b>□</b> 163.	i iii iii tile de	ians.	<b>D</b> 14			5.17		
				Debtor 1 Sources of income Describe below.	Gross income each source (before deducti exclusions)		Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: List	Certain Pa	ments You	Made Before You Filed for I	Bankruptcy				
6.	□ No.	Neither De individual puring the No. Yes	btor 1 nor Derimarily for a 90 days before Go to line 7 List below 6 paid that crunot include o adjustment r Debtor 2 or 90 days before Go to line 7 List below 6	each creditor to whom you paideditor. Do not include payment payments to an attorney for the condition of th	mer debts. Consider purpose."  d you pay any cred a total of \$6,825 ts for domestic suris bankruptcy cases after that for cases mer debts.  d you pay any cred a total of \$600 of a total of \$600 of a total of \$600 of a purpose.	ditor a tota  * or more i pport oblig se. es filed on  ditor a tota  or more and	I of \$6,825* or mo n one or more pay ations, such as ch or after the date of l of \$600 or more?	re?  ments and the support and the support and support	ne total amount you nd alimony. Also, do t creditor. Do not
			attorney for	this bankruptcy case.					
	Creditor'	s Name and	Address	Dates of payme	nt Total a	mount paid	Amount you still owe	Was this p	payment for

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 38 of 56 Case number (if known)

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ontrol, or owner of 20% of	neral partners; partne or more of their voting	erships of which ye g securities; and a	ou are a genera iny managing a	al partner; corporations gent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
В.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cos		ments or transfer a	nny property on a	account of a d	ebt that benefited an
	No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.	cases, small claims action	s, divorces, collectio		actions, suppor	t or custody
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, f	oreclosed, garni	shed, attached	d, seized, or levied?
	Creditor Name and Address	<b>Describe the Property</b>		Date		Value of the
		Explain what happened	d			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec.  No Yes. Fill in the details.	otcy, did any creditor, inc ause you owed a debt?	luding a bank or fir			,
	Creditor Name and Address	Describe the action the	e creditor took	take	action was	Amount
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possess	ion of an assigne	ee for the bend	efit of creditors, a
De	rt 5: List Certain Gifts and Contributions					
	t 5: List Certain Gifts and Contributions  Within 2 years before you filed for bankrup	tcv. did vou give anv gift	s with a total value	of more than \$6	00 per person	?
٠.	■ No □ Yes. Fill in the details for each gift.	,,, g, g			F - P	
		Describe the citte		Deta	e vou dava	Value
	Gifts with a total value of more than \$600 per person	Describe the gifts		the ç	s you gave Jifts	Value
	Person to Whom You Gave the Gift and Address:					

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 39 of 56

Stacey Lynn Hayes

Stacey Lynn Hayes

14.	Within 2 years before you filed for bankro  ■ No  ■ Yes. Fill in the details for each gift or c		did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	ptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	■ No				
	☐ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	8			
16.	consulted about seeking bankruptcy or	prepar	did you or anyone else acting on your behalf pay ring a bankruptcy petition? ers, or credit counseling agencies for services require		erty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	′ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Kane & Papa, P.C. P.O. Box 508 Richmond, VA 23218-0508		\$380; Court Filing, credit report, COS	October 29, 2019	\$380.00
	Abacus Credit Counseling 17337 Ventura Boulevard Suite 226 Encino, CA 91316		\$25 Credit counseling	October 29,2019	\$25.00
	Boleman Law Firm 2104 W Laburnum Ave Suite 201 Richmond, VA 23227		\$621.90 via trustee payments	07/25/2019	\$621.90
17.	Within 1 year before you filed for bankru promised to help you deal with your cred Do not include any payment or transfer that	ditors		or transfer any prope	erty to anyone who
	■ No				
	☐ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 40 of 56

Stacey Lynn Hayes Case number (if known)

18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread  No  Yes. Fill in the details.	usiness or financial aff ade as security (such as	fairs? the granting of a			
	Person Who Received Transfer Address	Description and property transfer		paym	ribe any property or ents received or debts	Date transfer was made
	Person's relationship to you			paid i	n exchange	
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		ny property to a	self-settle	d trust or similar devic	e of which you are a
	Name of trust	Description and	value of the pror	erty trans	sferred	Date Transfer was
		Dood i palon and	raido or tiro prop	orty aram	31011 Gu	made
Par	rt 8: List of Certain Financial Accounts, Ins	struments, Safe Depos	it Boxes, and Sto	orage Unit	ts	
20.	Within 1 year before you filed for bankruptor sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associon No  Yes. Fill in the details.	or other financial accou	ınts; certificates	of deposi	•	•
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accourant instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Henrico Federal Credit Union 9401 West Broad Street Henrico, VA 23294	XXXX-1664	■ Checking □ Savings □ Money Mark □ Brokerage □ Other	ket	08/2019	\$0.00
	Henrico Federal Credit Union 9401 West Broad Street Henrico, VA 23294	XXXX-1664	☐ Checking ■ Savings ☐ Money Mark ☐ Brokerage ☐ Other	ket	08/19	\$0.00
21.	Do you now have, or did you have within 1 y cash, or other valuables?  No Yes. Fill in the details.	ear before you filed fo	r bankruptcy, an	y safe de <sub>l</sub>	posit box or other depo	ository for securities,
	Name of Financial Institution	Who else had ac	cass to it?	Describe	the contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	Address (Number, State and ZIP Code)		Describe	the contents	have it?
22.	_	or place other than you	r home within 1	year befo	re you filed for bankrup	otcy?
	No					
	Yes. Fill in the details.	Who clas has ar	had access	Doscribs	the contents	Do you still
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	ine coments	Do you still have it?

Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Case 19-35724-KLP Page 41 of 56
Case number (if known) Document

Debtor 1 Stacey Lynn Hayes

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.    No	Pai	t 9: Identify Property You Hold or Control for	Someone Else			
Yes. Fill in the details.   Where is the property?   Describe the property   Value Address (humber, Street, City, State and ZIP Code)   Where is the property?   Rumber, Street, City, State and ZIP Code)   Rumber, Street, City, State and Rumber Code and properties or the Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and ZIP Code)   Rumber, Street, City, State and Rumber Code and ZIP Code)   Rumber, Street, City, State and ZIP Code)   Rumber Code and Rumber Code and ZIP Code)   Rumber, Street, City, State and ZIP Code)   Rumber Code and ZIP Code)   Rumber, Street, City, State and ZIP Code)   Rumber Code and ZIP Code	23.		ne else owns? Include any prop	erty y	ou borrowed from, are storing for	or hold in trust
Owner's Name Address (Number, Street, City, State and ZIP Code)  Owner's Name Address (Number, Street, City, State and ZIP Code)  Owner's Name Address (Number, Street, City, State and ZIP Code)  Owner's Name Address (Number, Street, City, State and ZIP Code)  Owner's Name Address (Number, Street, City, State and ZIP Code)  Owner's Name Address (Number, Street, City, State and ZIP Code)  Owner's Name Address (Number, Street, City, State and ZIP Code)  Owner Countries of State Address (Number, Street, City, State and ZIP Code)  Addres		■ No				
Address (Number, Street, City, State and ZIP Code)  (Number, Stree		Yes. Fill in the details.				
Ervironmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.  Site means any location, facility, or properly as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code) Address (Number			(Number, Street, City, State and ZIP	De	escribe the property	Value
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.    Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.    Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.    Report all notices, releases, and proceedings that you know about, regardless of when they occurred.    Assumption of the details of the d	Pai	t 10: Give Details About Environmental Informa	ation			
toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.  Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No	For	the purpose of Part 10, the following definitions	apply:			
to own, operate, or utilize it, including disposal sites.  **Hazardous material, means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  **No**  No**   Yes. Fill in the details.   Name of site Address (Number, Street, City, State and ZIP Code)   Address (Number, Stre		toxic substances, wastes, or material into the ai	ir, land, soil, surface water, grou	_	•	
hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No			•	l law,	, whether you now own, operate, o	r utilize it or used
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  Part 112 Give Details About Your Business or Connections to Any Business  Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership				ıs wa	aste, hazardous substance, toxic s	ubstance,
No   Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   Address (Number, Street, City, State	Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wh	en the	ey occurred.	
Yes. Fill in the details.   Name of site Address (Number, Street, City, State and ZIP Code)    25. Have you notified any governmental unit of any release of hazardous material?   No	24.	Has any governmental unit notified you that you	ı may be liable or potentially liab	le un	der or in violation of an environme	ental law?
Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  Part 11: Give Details About Your Business or Connections to Any Business  Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership						
No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Case Title Case Number  Case Number  Case Number  Case Number  Name Address (Number, Street, City, Street, City, Street, City, State and ZIP Code)  Part 11: Give Details About Your Business or Connections to Any Business  7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership			Address (Number, Street, City, State a	and		Date of notice
Yes. Fill in the details.   Name of site	25.	Have you notified any governmental unit of any	release of hazardous material?			
Name of site Address (Number, Street, City, State and ZIP Code)  26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No Yes. Fill in the details.  Case Title Case Number  Case Number  Case Number  Case Number  Case Number  Case Details About Your Business or Connections to Any Business  27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership		■ No				
Address (Number, Street, City, State and ZIP Code)  Address (Number any environmental law? Include settlements and orders.  No Yes. Fill in the details.  Case Title Case Number  Case Number  Case Number  Case Number  Case Number  Status of the case  Address (Number, Street, City, State and ZIP Code)  Nature of the case  Status of the case  Status of the case  Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership		Yes. Fill in the details.				
No   Yes. Fill in the details.   Case Title			Address (Number, Street, City, State a	and	. •	Date of notice
☐ Yes. Fill in the details.         Case Title Case Number       Court or agency Name Address (Number, Street, City, State and ZIP Code)       Nature of the case       Status of the case         Part 11: Give Details About Your Business or Connections to Any Business         27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?         ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time         ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)         ☐ A partner in a partnership	26.	Have you been a party in any judicial or adminis	strative proceeding under any en	viron	mental law? Include settlements a	nd orders.
Case Title Case Number  Case Number  Court or agency Name Address (Number, Street, City, State and ZIP Code)  Part 11:  Give Details About Your Business or Connections to Any Business  7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership		No				
Case Number  Name Address (Number, Street, City, State and ZIP Code)  Part 11: Give Details About Your Business or Connections to Any Business  27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership		Yes. Fill in the details.				
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  \[ \Begin{align*} \text{A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time \[ \Begin{align*} \text{A member of a limited liability company (LLC) or limited liability partnership (LLP) \[ \Begin{align*} \text{A partner in a partnership} \]			Name Address (Number, Street, City,	Na	ature of the case	
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □	Pai	t 11: Give Details About Your Business or Con	nections to Any Business			
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □	27.	Within 4 years before you filed for bankruptcy, of	did vou own a business or have a	anv o	f the following connections to any	business?
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership —			•	•	•	
☐ A partner in a partnership		_		-	•	
		<u> </u>	(===) or minica hability partiters	Þ (1	,	
An officer, director, or managing executive of a corporation		☐ An officer, director, or managing execut	ive of a corporation			

 $\hfill\square$  An owner of at least 5% of the voting or equity securities of a corporation

Entered 10/30/19 14:52:51 Desc Main Case 19-35724-KLP Doc 1 Filed 10/30/19 Document Page 42 of 56 Case number (if known) Debtor 1 Stacey Lynn Hayes No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Stacey Lynn Hayes Signature of Debtor 2 Stacey Lynn Hayes Signature of Debtor 1 Date October 29, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main

# Document Page 43 of 56 United States Bankruptcy Court Eastern District of Virginia

	g		
Stacey Lynn Hayes		Case No.	
	Debtor(s)	Chapter	13

	IN A CHAPTER 13 C	<u>ASE</u>	
	(for use in the Richmond Div	vision only)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that compensation paid to me, for services rendered or to be rendered on behalf of bankruptcy case is as follows:		
	For legal services, I have agreed to accept	\$	5,296.00
	Prior to the filing of this statement I have received	\$	0.00
	Balance Due		5,296.00
2.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify)		
3.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify)		
4.	■ I have not agreed to share the above-disclosed compensation with any other p	erson unless they are n	nembers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or per copy of the agreement, together with a list of the names of the people sharing		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all a Bankruptcy Rule $2016-1(C)(3)$ .	aspects of the bankrupt	cy case, as required by Local
6.	I am electing to request compensation and reimbursement of expenses in this case	2:	
	a. ■ In accordance with the "no-look" fee set forth in Local Bankruptcy Rule	e 2016-1(C)(1)(a) and (	C)(3)(a).
	b. $\square$ By submitting applications for compensation in the manner set forth in I	Local Bankruptcy Rule	2016-1(C)(1)(c)(ii).
	An attorney for the debtor that fails to make the election to request compensat (C)(3)(a) at the commencement of the case will be deemed to have elected to Bankruptcy Rule 2016-1(C)(1)(c)(ii).		

In re

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 44 of 56

CERTIFICATION

I certify that the foregoing is an accurate statement of any	agreement or arrangement for p	payment to me for representation	of the debtor(s) in
this bankruptcy proceeding.			

October 29, 2019	
Date	

/s/ James E. Kane, Esquire James E. Kane, Esquire 30081 Signature of Attorney

Kane & Papa, P.C.

Name of Law Firm
P.O. Box 508
Richmond, VA 23218-0508
804-225-9500 Fax: 804-225-9598

# NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

#### PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

October 29, 2019	
Date	

James E. Kane, Esquire

James E. Kane, Esquire 30081

Signature of Attorney

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 45 of 56

Fill in this inform	nation to identify your case:	
Debtor 1	Stacey Lynn Hayes	
Debtor 2 (Spouse, if filing)		
United States B	Sankruptcy Court for the: Eastern District of Virginia	
Case number (if known)		

Check as directed in lines 17 and 21:				
According to the calculations required by this Statement:				
•	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).			
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).			
	3. The commitment period is 3 years.			
	4. The commitment period is 5 years.			

 $\square$  Check if this is an amended filing

#### Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

I	Part	1: Calculate Your Average Monthly Income							
Ī	1.	What is your marital and filing status? Check one of	nly.						
		■ Not married. Fill out Column A, lines 2-11.							
		☐ Married. Fill out both Columns A and B, lines 2-11.							
	10 th	Il in the average monthly income that you received from al 11(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the tota ouses own the same rental property, put the income from that	month per al by 6. Fil	iod would I in the re	be March 1 throusult. Do not include	igh Aug le any ii	gust 31. If the amount m	ount of your monthly incom ore than once. For examp	ne varied during le, if both
						Colun		Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissio	ons (before all	\$	1,786.68	\$	
	3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	e payme	nts from	a spouse if	\$	0.00	\$	
	4.	All amounts from any source which are regularly por you or your dependents, including child suppor from an unmarried partner, members of your household and roommates. Do not include payments from a spouyou listed on line 3.	<b>t.</b> Include ld, your o	e regulai depende	r contributions nts, parents,	\$	0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debtor	1					
		Gross receipts (before all deductions)	\$	0.00					
		Ordinary and necessary operating expenses	-\$	0.00					
		Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$	0.00	\$	
	6.	Net income from rental and other real property	Debtor						
		Gross receipts (before all deductions)	\$_	0.00					
		Ordinary and necessary operating expenses	-\$	0.00		•		•	
ı		Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 46 of 56

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 o			
7.	Interest. di	ividends, and royalties			\$	0.00	\$			
		ment compensation			\$	0.00	 ) \$			
	the Social S	er the amount if you contend that the amo Security Act. Instead, list it here:					<u> </u>			
	For your	spouse	\$	<u> </u>						
9.	Pension or benefit und not include United Stat disability, o pay paid un does not ex	r retirement income. Do not include any er the Social Security Act. Also, except a any compensation, pension, pay, annuit ses Government in connection with a disar death of a member of the uniformed sender chapter 61 of title 10, then include the ceed the amount of retired pay to which der any provision of title 10 other than ch	amount received that was as stated in the next senter y, or allowance paid by the ability, combat-related injurrvices. If you received any nat pay only to the extent the you would otherwise be element to be sentended.	nce, do e ry or retired hat it	\$	0.00	<b>)</b>			
10.	Income from Do not include received as domestic to United State disability, o	om all other sources not listed above.  ude any benefits received under the Soci is a victim of a war crime, a crime against errorism; or compensation, pension, pay, les Government in connection with a disa r death of a member of the uniformed se a separate page and put the total below	Specify the source and am ial Security Act; payments humanity, or international annuity, or allowance paidility, combat-related injurrvices. If necessary, list ot	or d by the ry or						
					\$	0.00	) \$			
					\$	0.00	) \$			
	To	otal amounts from separate pages, if any		+	\$	0.00	) \$			
11. Part	each colum	your total average monthly income. Acon. Then add the total for Column A to the ermine How to Measure Your Deduction	e total for Column B.	\$	1,786.68	+ \$			1,786	
12. 13.	Copy your Calculate t	total average monthly income from lithe marital adjustment. Check one:	ne 11.					\$	1,786	.68_
	■ You a	re not married. Fill in 0 below.								
	☐ You a	re married and your spouse is filing with	you. Fill in 0 below.							
		re married and your spouse is not filing v								
	Fill in t depen	the amount of the income listed in line 11 dents, such as payment of the spouse's	I, Column B, that was NO tax liability or the spouse's	T regulai s suppor	ly paid for the	ne hous e other	sehold expenses than you or you	s of you c ır depenc	or your lents.	
	adjust	r, specify the basis for excluding this inco ments on a separate page.		ome dev	oted to each	purpo	se. If necessary	∕, list addi	tional	
	If this	adjustment does not apply, enter 0 belov	V.	¢						
	-			φ \$		_				
	-			+\$		_				
	-			<u> </u>		_				
		Total		\$	0.00	0	Copy here=>			0.00
14.	Your curr	rent monthly income. Subtract line 13 f	from line 12.					\$	1,786	.68
15.	Calculate	your current monthly income for the	year. Follow these steps:						4 700	00
	15a. Cop	by line 14 here=>						\$	1,786	80

Stacey Lynn Hayes

Debtor 1

### Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 47 of 56

Debtor 1	Stacey Lynn Hayes	Case number (if known)	
	Multiply line 15a by 12 (the number of months in a year).	<b>x</b> 12	ı
15	b. The result is your current monthly income for the year for this part of	the form. \$ 21,440.16	

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 48 of 56

Debt	or 1	Stace	y Lynn Hayes		Case number (if I	known)		
16	. Cal	culate tl	he median family income that applies to yo	ou. Follo	w these steps:			
	16a	. Fill in tl	he state in which you live.	V	Α			
	16b	. Fill in tl	he number of people in your household.		I			
	16c	. Fill in th	ne median family income for your state and s	size of ho	usehold.		\$	61,864.00
			a list of applicable median income amounts, tions for this form. This list may also be available.			arate		
17	. Hov	v do the	e lines compare?		, ,			
	17a	. •	Line 15b is less than or equal to line 16c. Of 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do No.					termined under
	17b	. 🗆	Line 15b is more than line 16c. On the top of 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> l your current monthly income from line 14 ab	lation of				
Par	t 3:	Calc	ulate Your Commitment Period Under 11 L	U.S.C. §	1325(b)(4)			
18.	Cop	y your	total average monthly income from line 11	1		\$ <sub>_</sub>		1,786.68
19.	con	tend tha	marital adjustment if it applies. If you are to calculating the commitment period under 11 come, copy the amount from line 13.	married, 1 U.S.C.	your spouse is not filing with you, ar § 1325(b)(4) allows you to deduct pa	nd you art of your		
	19a	. If the m	narital adjustment does not apply, fill in 0 on I	line 19a.		-\$		0.00
	19b	Subtra	ct line 19a from line 18.				\$	1,786.68
20	Cal	sulato v	our current monthly income for the year.	Follow th	acco stone:	l		
20.		_	ne 19b				\$	1,786.68
			y by 12 (the number of months in a year).				<b>x</b>	12
			, , ,					12
	20b	. The re	sult is your current monthly income for the ye	ear for thi	s part of the form		\$	21,440.16
		_						C4 0C4 00
	20c	. Copy tl	he median family income for your state and s	size of ho	usehold from line 16c		\$	61,864.00
	21.	How d	o the lines compare?					
			ne 20b is less than line 20c. Unless otherwis eriod is 3 years. Go to Part 4.	se ordere	d by the court, on the top of page 1	of this form, check bo	x 3, The	e commitment
			ne 20b is more than or equal to line 20c. Unlornmitment period is 5 years. Go to Part 4.	less othe	rwise ordered by the court, on the to	p of page 1 of this for	rm, chec	ck box 4, The
Par	t 4:	Sign	Below					
	By s	signing h	nere, under penalty of perjury I declare that the	he inform	ation on this statement and in any a	ttachments is true and	d correc	t.
)			y Lynn Hayes					
			<b>ynn Hayes</b> of Debtor 1					
	Date		ber 29, 2019					
	lf vo		DD / YYYY  red 17a, do NOT fill out or file Form 122C-2.					
	-		ed 17b, fill out Form 122C-2 and file it with the	his form.	On line 39 of that form, copy your cu	urrent monthly income	e from lir	ne 14 above.

Case 19-35724-KLP Doc 1 Filed 10/30/19 Entered 10/30/19 14:52:51 Desc Main Document Page 49 of 56

Debtor 1 Stacey Lynn Hayes

Case number (if known)

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 04/01/2019 to 09/30/2019.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Dart** Income by Month:

6 Months Ago:	04/2019	\$3,000.00
5 Months Ago:	05/2019	\$0.00
4 Months Ago:	06/2019	\$0.00
3 Months Ago:	07/2019	\$0.00
2 Months Ago:	08/2019	\$0.00
Last Month:	09/2019	\$0.00
	Average per month:	\$500.00

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Fresenius

Income by Month:

6 Months Ago:	04/2019	\$0.00
5 Months Ago:	05/2019	\$0.00
4 Months Ago:	06/2019	\$0.00
3 Months Ago:	07/2019	\$0.00
2 Months Ago:	08/2019	\$2,472.04
Last Month:	09/2019	\$5,248.03
	Average per month:	\$1,286.68

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. ACAC, Inc 2019 S. Crater Road Petersburg, VA 23805

Ashley Funding Services P. O. Box 10587 Greenville, SC 29603

Boleman Law FIrm 2104 W Laburnum Ave Suite 201 Richmond, VA 23227

Brookwood Loans of Virginia 2901 South Lynnhaven Rd. Suite 140 Virginia Beach, VA 23452

Cash 2 U Financial Service 4721 West Broad St. Richmond, VA 23230

Chesterfield County Treasurer P.O. Box 26585 Richmond, VA 23261

Commonwealth Dentistry 6750 Forest Hill Ave Richmond, VA 23225

Credit One Bank P.O. Box 98873 Las Vegas, NV 89193

Henrico Federal Credit Union 9401 West Broad Street Henrico, VA 23294

Hopewell Chemical FCU PO Box 449 Hopewell, VA 23860

Internal Revenue Service Centralized Insolvency Operati P. O. Box 7346 Philadelphia, PA 19101-7346 Jefferson Capital Systems P O Box 772813 Chicago, IL 60677

Lab Corp PO Box 10587 Greenville, SC 29603

Lafayette Ayers & Whitlock 10160 Staples Mill Road Suite 105 Glen Allen, VA 23060

Lendmark Financial 2118 Usher Street Covington, GA 30014

LVNV Funding, LLC P.O. Box 3038 Evansville, IN 47730

Noth Shore Medical Labs 463 Willis Avenue Williston Park, NY 11596

Penn Credit PO Box 988 Harrisburg, PA 17108

Peoples Advantage FCU PO Box 3180 Petersburg, VA 23805

Peritus Portfolio PO BOX 141419 Irving, TX 75014

Professional Credit Solutions ATTN BANKRUPTCY PO Box 2625 Chesterfield, VA 23832 Progressive 11629 South 700 East Suite 250 Draper, UT 84020

Regional Acceptance Corp. 266 Beacon Drive Winterville, NC 28590

Shiva Finance LLC PO BOx 121950 Nashville, TN 37212

Thomas Schleicher, DDS 3630 Boulevard Colonial Heights, VA 23834

US Dept of Education PO Box 530229 Atlanta, GA 30353

Virginia Department of Taxatio PO Box 2369 Richmond, VA 23218